

AUG 10 1989

Certified Mail
Return Receipt Requested

Mr. Jim Jensen
Environmental Coordinator
Square D Company
P.O. Box 3069
Cedar Rapids, Iowa 52406-3069

Re: Square D Company
Cedar Rapids, Iowa
EPA ID No. IAD000819110

Dear Mr. Jensen:

This is in response to your letter, received in this office on August 7, 1989, regarding an extension to the ninety (90) day storage period allowed for generators of hazardous waste, as specified at 40 Code of Federal Regulations (CFR) 262.34.

The extension is requested for one drum of waste xylene (F003). The extension was requested because your disposer, Hydrite Chemical, could not pick up the drum until August 10, 1989, due to scheduling problems, and the ninety (90) day storage limit expired on July 28, 1989.

This letter grants a thirty (30) day extension to the Square D Company for storage of the one drum of waste xylene (F003). Within thirty (30) days of the shipment of that drum, you must submit a copy of the completed manifest and LDR notice to Ms. Lynn Slugantz, RCRA/IOWA, U. S. Environmental Protection Agency, 726 Minnesota Avenue, Kansas City, Kansas 66101. No further extensions regarding this drum of waste xylene can be granted. Therefore, you must ensure its off-site transportation for proper treatment and/or disposal before August 28, 1989.

In the future, should a thirty (30) day extension for storage of hazardous waste be necessary, the request must be made prior to the expiration of the ninety (90) day limit.



R00352688
RCRA RECORDS CENTER

If you should have any questions regarding this letter,
please call Ms. Lynn Slugantz at (913) 236-2887.

Sincerely yours,

Robert L. Morby
Chief, RCRA Branch
Waste Management Division

cc: Pete Hamlin, IDNR

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UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

- Print your name, address and ZIP Code in the space below.
- Complete Items 1, 2, 3, and 4 on the reverse.
 - Attach to front of article if space permits, otherwise affix to back of article.
 - Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

RCRA / TOLOA

U.S. EPA, RCRA Branch
726 Minnesota Avenue
Kansas City, Kansas 66101

L.S.

37

P 056 317 504

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to	Square D Co
Jim Jensen	
Street and No.	P.O. Box 3069
P.O., State and ZIP Code	52406-3069
Cedar Rapids, IA	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$

1, June 1985

<p>SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.</p> <p>Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent the card from being returned to you. The return receipt will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.</p> <p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. 2. <input type="checkbox"/> Restricted Delivery (Extra charge)</p>		<p>3. Article Addressed to:</p> <p>Mr. Jim Jordan Environmental Coordinator Square D Company P.O. Box 3069 Federal Republic of Germany 3069</p>		<p>4. Article Number</p> <p>PO56 317 504</p>	
<p>5. Signature - Address</p> <p>X</p>		<p>6. Signature - Agent</p> <p>X</p>		<p>7. Date of Delivery</p> <p>AUG 14 1988</p>	
<p>8. Addressee's Address (ONLY if requested and fee paid)</p>		<p>9. Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>		<p>10. PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865</p>	

POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE,
L FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

receipt postmarked, stick the gummed stub to the right of the return address leaving
and present the article at a post office service window or hand it to your rural carrier.

this receipt postmarked, stick the gummed stub to the right of the return address of
and retain the receipt, and mail the article.

on receipt, write the certified mail number and your name and address on a return
11, and attach it to the front of the article by means of the gummed ends if space per-
to back of article. Endorse front of article **RETURN RECEIPT REQUESTED**
or.

ry restricted to the addressee, or to an authorized agent of the addressee, endorse
DELIVERY on the front of the article.

services requested in the appropriate spaces on the front of this receipt. If return
check the applicable blocks in item 1 of Form 3811.

U.S.G.P.O. 1988-212-865